

CHUBB®

Medical Protection

Chubb VHIS - Superb Plan

Product Brochure



Superb protection with greater mobility and flexibility

In Hong Kong, getting timely healthcare is often a challenge. Public hospitals involve long waiting times, while private medical expenses often amount to hundreds of thousands of dollars. With medical inflation driving costs higher each year, more people are turning to mainland China, where options of medical services have become more accessible and offered reliable standards.

That's why we introduced the **Chubb VHIS – Superb Plan** (the “Plan”), a Flexi Plan certified under the Government's Voluntary Health Insurance Scheme (“VHIS”). The Plan provides full cover¹ for Eligible Expenses in General Ward class, giving you comprehensive protection across medical needs without worrying the burden of itemised sub-limits. You can choose from a range of Deductible options, with an Annual Benefit Limit of up to HKD 6 million and without any Lifetime Benefit Limit. The Plan makes quality medical services accessible to more families.

Moreover, the Plan also extends to cover the medical expenses for non-Emergency treatment in Greater China², including mainland China Class 2 or above Hospitals, giving you greater flexibility and mobility to address your medical needs whenever and wherever. With added specialist referral assistance, on-the-ground medical companion service and cashless arrangement service, cross-border care has never been smoother and more reassuring.



First-in-market³ – “Back-You-Up Deductible⁴”

If the Insured Person receives medical treatments at a mainland China Class 2 or above public Hospital, the out-of-pocket expenses will become lower. This unique feature makes cross-border care even more affordable, so you can choose the right care with less financial concern.

Tax deduction eligibility⁵

As a VHIS Certified Plan, the qualifying premiums you pay for yourself and your eligible family members under this Plan could be eligible for tax deductions of up to HKD 8,000 for each Insured Person per fiscal year⁵, helping you reduce the tax burden.

Product Highlights

Value-added services



Value-added services for worry-free cross-border care

- Cashless arrangement service across Hong Kong, Macau and mainland China
- Mainland China prestige medical companion service
- Specialist referral and appointment service
- Medical green channel
- Second medical opinion consultation

DID YOU KNOW?

Stable cases at public hospital specialist clinics in Hong Kong can face waits of up to nearly

2 years⁽ⁱ⁾.

Over **70%** of Hong Kong residents are open to traveling to mainland China for medical services⁽ⁱⁱⁱ⁾.

About

3.49 million Hong Kong residents, nearly half of the population, do not have employer-provided or individual medical insurance⁽ⁱⁱ⁾.

The price difference for targeted therapy drugs between Hong Kong and mainland China can be as high as

9 times^(iv).

Sources of information:

(i) Hospital Authority, Waiting Time for New Case Booking at Surgery Specialist Out-patient Clinics (Jul 2024 – Jun 2025):

<http://bit.ly/4nmR5WX>

(ii) Census & Statistics Department, Thematic Household Survey Report No. 78 (2024): <http://bit.ly/49qq6Xb>

(iii) Oriental Daily, 6 Jun 2022: <http://bit.ly/47IZWxD>

(iv) Cancer Information, 17 Oct 2024: <http://bit.ly/47IOYlp>

Note:

The above information is obtained from sources that Chubb Life believes to be reliable and is for reference only. However, Chubb Life has not independently verified the information. Chubb Life does not guarantee, represent or warrant the accuracy and completeness of the information and does not assume any responsibility or liability for the information. Chubb Life shall not be responsible or liable for any loss incurred by any person due to reliance on such information.

The Benefits



Full cover¹ for medical expenses, with no Lifetime Benefit Limit – Superb protection at every step of the way

Your health deserves the best protection, and **Chubb VHIS – Superb Plan** delivers just that. The Plan provides full cover¹ for Eligible Expenses without worrying the burden of itemised sub-limits, while expanding the safety net to support you at every stage – from diagnosis and treatment to recovery:

Diagnosis	<ul style="list-style-type: none">• Full cover¹ for pre-Confinement / Day Case Procedure outpatient care within 30 days prior to Confinement / Day Case Procedure (subject to the limit of number of visits)• Full cover¹ for Prescribed Diagnostic Imaging Tests, including CT, MRI and PET scans
Treatments	<ul style="list-style-type: none">• Full cover¹ for hospitalisation cost including room and board, attending doctor's visit fees, specialist's fees, surgeon's fees, anaesthetist's fees, operating theatre charges, intensive care and companion's bed• Full cover¹ for outpatient kidney's dialysis treatment• Full cover¹ for emergency outpatient treatment• Coverage for psychiatric treatments during Confinement in Hong Kong• Full cover¹ for Prescribed Non-surgical Cancer Treatments
Recovery	<ul style="list-style-type: none">• Full cover¹ for post-Confinement and Day Case Procedure outpatient care within 90 days after discharge from Hospital / completion of Day Case Procedure (subject to the limit of number of visits)• Full cover¹ for home nursing expense (subject to the limit of days per Policy Year)• Coverage for reconstructive surgery, medical appliances, and post-Confinement / Day Case Procedure outpatient ancillary services, including diet therapy and Chinese medicine consultation (subject to the limit of number of visits)

The Plan offers an Annual Benefit Limit of up to HKD 6 million with no Lifetime Benefit Limit, providing enduring protection not only for initial illnesses but also for subsequent treatments and follow-up care. This comprehensive coverage delivers ongoing reassurance whenever required.

Please refer to "Benefit Schedule" section in this product brochure for the detailed benefits coverage and benefit limit.

The Benefits



Coverage for unknown Pre-existing Condition(s)⁶

Some health conditions may go undetected for years. With the Plan, any Pre-existing Condition(s)⁶ that was unknown at the time of insurance application will be covered starting from the 31st day of the 1st Policy Year, ensuring the Insured Person is not left vulnerable to unexpected health challenges.



What's more protection?

Cash benefits to provide extra financial support

Chubb VHIS – Superb Plan is designed to go beyond covering medical expenses, offering a range of cash benefits to provide you with practical support during challenging times in various situations. We will offer an additional cash benefit if the Insured Person undergoes a Day Case Procedure, as well as a top up subsidy cash benefit for each day of Confinement if the Eligible Expenses have been paid by other insurance companies.

For added peace of mind, the Plan also includes compassionate death benefit and an accidental death benefit, offering your family additional financial support. Furthermore, a medical negligence benefit is included, providing your family with extra financial protection if the Insured Person dies because of proven medical negligence.

Please refer to “**Benefit Schedule**” section in this product brochure for the detailed benefits coverage and benefit limit.



Greater China² coverage with 4 flexible Deductible options

More people in Hong Kong are now open to cross-border medical treatment as the medical standards in mainland China continue to improve and more options become available. The Plan keeps pace with this trend by providing coverage not only in Hong Kong, but also covers medical expenses for non-emergency treatment incurred in Taiwan, Macau and Class 2 or above Hospitals in mainland China. This gives you a broader safety net and the flexibility to access timely treatment wherever it suits you best.

You can also match your coverage to your budget by choosing a Deductible amount – HKD 0 / HKD 25,000 / HKD 50,000 / HKD 100,000, which is calculated per Policy Year.



What is Deductible? Can I reduce my Deductible as I age?

Deductible refers to the amount that you need to pay out-of-pocket when you make a claim. The insurance company will reimburse the remaining Eligible Expenses after deducting the Deductible amount, in accordance with the details of your policy, including the scope of benefits coverage, benefit limits, and related terms.

To provide greater flexibility in budget planning for your post-retirement years, the Plan offers you the flexibility to reduce the Deductible once during the lifetime of the Insured Person, enabling you to realign your protection for the years ahead. This adjustment can be made without underwriting within 31 days before or after the Renewal Date nearest to the Insured Person's milestone Ages (Age 50, 55, 60, 65, 70, 75 or 80), so that you can maintain the coverage that adapts to your changing circumstances.

The Benefits



First-in-market³

“Back-You-Up Deductible⁴” for lower medical expenses

The Plan introduces the first-in-market³ “Back-You-Up Deductible⁴”, making cross-border care not only accessible but also more affordable. If the Insured Person receives medical treatment at a mainland China Class 2 or above Hospital or home nursing in mainland China, the amount of “Back-You-Up Deductible⁴” applies in lieu of the selected Deductible amount of the Plan per Policy Year, as shown in the following table. This reduces the relevant out-of-pocket expenses, offering greater flexibility and freedom in the medical choices.

The selected Deductible amount of the Plan per Policy Year	“Back-You-Up Deductible ⁴ ” amount per Policy Year
HKD 0	HKD 0
HKD 25,000	HKD 0
HKD 50,000	HKD 25,000
HKD 100,000	HKD 50,000

Illustrative case

Mr. Chan purchased the **Chubb VHIS – Superb Plan**
The selected Deductible per Policy Year: HKD 25,000
“Back-You-Up Deductible⁴” per Policy Year: HKD 0



Date of Treatment	Jan 2026 (1 st Claim)	Jun 2026 (2 nd Claim)
Treatment performed	Left knee replacement surgery at a Class 2 Hospital in mainland China, 5-day stay in a General Ward	Right knee replacement surgery at a private Hospital in Hong Kong, 3-day stay in a General Ward
Claim amount payable (in HKD)	<p>Eligible medical expenses: RMB 42,000 (approx. HKD 46,200)</p> <p>Claim amount payable: HKD 46,200 (The treatment is received at a Class 2 Hospital in mainland China, the “Back-You-Up Deductible⁴” applies in lieu of the selected Deductible amount of the Plan)</p>	<p>Eligible medical expenses: HKD 120,000</p> <p>The selected Deductible of the Plan remaining balance: HKD 0</p> <p>Claim amount payable: HKD 120,000 (The treatment is received at a private Hospital in Hong Kong, the remaining balance of the selected Deductible will be applied)</p>
The selected Deductible of the Plan and “Back-You-Up Deductible ⁴ ” remaining balance (in HKD)	<p>“Back-You-Up Deductible⁴” remaining balance: HKD 0</p> <p>The selected Deductible of the Plan remaining balance: HKD 0 (The claim amount payable is larger than the selected Deductible)</p>	<p>The selected Deductible of the Plan remaining balance: HKD 0</p>

The Benefits

Notes:

- The above case is fictional and for illustrative purposes and reference only. Any relation to or reference to any actual person, party or event is purely coincidental. The nature of the case herein (if any) should not be interpreted as any comment on, or confirmation or extension of, insurance coverage for any past, present or future case. Furthermore, this case should not be relied upon to predict the outcome of any actual case as all cases are evaluated on their own individual merits and subject to the actual terms and conditions of the relevant policy. It is important to note that each actual case is unique.
- The exchange rate is calculated as HKD 1 to RMB 0.9 for illustrative purpose only. The actual exchange rate applied in benefit calculation is subject to the prevailing exchange rate as determined by the Company from time to time.
- The above case assumes that all treatments are performed within the same Policy Year.
- In the event that the remaining balance of Deductible is reduced by any Eligible Expenses and / or other expenses, such reduction amount shall also be reduced from the remaining balance of "Back-You-Up Deductible" in the relevant Policy Year, or vice versa (where applicable).



Guaranteed Renewal up to Age 128⁷

One of the most common concerns about health insurance is whether the protection will last as you age. With guaranteed Renewal up to Age 128⁷ of the Insured Person, this Plan ensures the coverage is designed to last a lifetime. You may focus on achieving your life goals with confidence by knowing that the medical benefits will continue to safeguard you and your family throughout the years.

Value-added Services⁸



Value-added services⁸ for worry-free cross-border care

Seeking treatment outside Hong Kong can feel daunting, especially when facing a different system and environment. The Plan includes a set of value-added services⁸ designed to guide you through every stage of the journey:

- Cashless arrangement service** across Hong Kong, Macau and mainland China, so you can focus on your health without worrying about upfront payments.
- Mainland China prestige medical companion service** for on-the-ground support during your treatment.
- Specialist referral and appointment service** to connect you with the suitable specialists.
- Medical green channel** for faster admission to designated Hospitals.
- Second medical opinion consultation** is offered to give you greater confidence in the healthcare decisions.

For details, please refer to the “**Chubb VHIS – Superb Plan Value-added Services Leaflet**”.

The value-added services are optional and do not form part of the VHIS certified plan.



Outpatient care across Hong Kong, Macau and designated GBA cities⁹

Looking for everyday healthcare alongside major medical protection? The **GBA Medical Outpatient Plan**[^] complements your VHIS coverage with outpatient essentials across Hong Kong, Macau and designated GBA cities⁹. From general practitioner and Chinese medicine consultations to dental care and preventive screenings, it keeps you and your family supported day to day, creating a total cross-border medical package when paired with the **Chubb VHIS – Superb Plan**.

Scan for more details:



[^]GBA Medical Outpatient Plan is not part of the VHIS certified plan and subject to payment of additional premium, which is not eligible for tax deduction.

Benefit Schedule

Geographical Limitation ⁽¹⁾	Except for psychiatric treatments (Hong Kong only) - For non-Emergency Treatment: Greater China ⁽²⁾ For Emergency Treatment: Worldwide	
Entitled Ward Class	General Ward ⁽³⁾	
Annual Benefit Limit for benefit items: i. Basic benefits (a) – (l) ii. Enhanced benefits 1 – 7 iii. Other benefits 1 – 2	HKD 6,000,000 per Policy Year	
Lifetime Benefit Limit for benefit items: i. Basic benefits (a) – (l) ii. Enhanced benefits 1 – 7 iii. Other benefits 1 – 2	Nil	
Deductible for benefit items: i. Basic benefits (a) – (l) ii. Enhanced benefits 1 – 7	Deductible (per Policy Year)	“Back-You-Up Deductible ⁽⁴⁾ ” (per Policy Year)
	HKD 0	HKD 0
	HKD 25,000	HKD 0
	HKD 50,000	HKD 25,000
	HKD 100,000	HKD 50,000
Benefit Items ⁽⁵⁾ Benefit Limit		
I. Basic benefits		
(a) Room and board	Full cover ⁽⁶⁾	
(b) Miscellaneous charges	Full cover ⁽⁶⁾ (Subject to the benefit limit of Enhanced benefit 6 “Medical appliances benefit”)	
(c) Attending doctor’s visit fee	Full cover ⁽⁶⁾	
(d) Specialist’s fee ⁽⁷⁾	Full cover ⁽⁶⁾	
(e) Intensive care	Full cover ⁽⁶⁾	
(f) Surgeon’s fee	Full cover ⁽⁶⁾ regardless of surgical category	

I. Basic benefits	
(g) Anaesthetist's fee	Full cover ⁽⁶⁾
(h) Operating theatre charges	Full cover ⁽⁶⁾
(i) Prescribed Diagnostic Imaging Tests ⁽⁷⁾⁽⁸⁾	Full cover ⁽⁶⁾
(j) Prescribed Non-surgical Cancer Treatments ⁽⁹⁾	Full cover ⁽⁶⁾
(k) Pre- and post-Confinement / Day Case Procedure outpatient care ⁽⁷⁾	<p>Full cover⁽⁶⁾</p> <p>Before Confinement / Day Case Procedure:</p> <ul style="list-style-type: none"> All outpatient visits (within 30 days prior to Confinement / Day Case Procedure, maximum 1 outpatient visit per day) Maximum 1 outpatient visit (more than 30 days prior to Confinement / Day Case Procedure) <p>After Confinement / Day Case Procedure:</p> <ul style="list-style-type: none"> Maximum 12 outpatient visits (within 90 days after discharge from Hospital / completion of Day Case Procedure, subject to 1 outpatient visit per day)
(l) Psychiatric treatments	HKD 40,000 per Policy Year
II. Enhanced benefits	
1. Companion's bed benefit	Full cover ⁽⁶⁾
2. Home nursing expense benefit ⁽⁷⁾	<p>Full cover⁽⁶⁾</p> <p>Maximum 60 days per Policy Year (within 90 days after discharge from Hospital following a surgical procedure or admission to Intensive Care Unit, subject to 1 Registered Nurse per day)</p>
3. Outpatient kidney's dialysis treatment benefit ⁽⁷⁾	Full cover ⁽⁶⁾
4. Emergency outpatient treatment benefit	Full cover ⁽⁶⁾
5. Reconstructive surgery benefit ⁽⁷⁾	HKD 160,000 per Accident / per mastectomy
6. Medical appliances benefit	<p>Specified items⁽¹⁰⁾: Full cover⁽⁶⁾</p> <p>Non-specified items⁽¹⁰⁾: HKD 100,000 per Policy Year</p>
7. Post-Confinement / Day Case Procedure outpatient ancillary benefit ⁽⁷⁾	<p>HKD 1,000 per visit</p> <p>Maximum 30 visits per Policy Year (within 90 days after discharge from Hospital / completion of Day Case Procedure, subject to 1 visit per day)</p>

III. Other benefits

1. Day Case Procedure cash benefit	HKD 1,200 per Day Case Procedure Maximum 10 Day Case Procedures per Policy Year, subject to 1 Day Case Procedure per day
2. Top up subsidy cash benefit	HKD 800 per day of Confinement Maximum 90 days per Policy Year
3. Compassionate death benefit	HKD 10,000
4. Accidental death benefit	HKD 10,000
5. Medical negligence benefit	HKD 10,000

Remarks:

- (1) Eligible Expenses and / or other expenses incurred for any non-Emergency Treatments performed outside Greater China shall be payable up to the benefit limits as stated in the Benefit Schedule attached to the Standard Plan Terms and Benefits. Psychiatric treatments shall only be payable for Confinement in Hong Kong. Please refer to the Supplement – Limitation of Benefits for details.
- (2) Greater China shall mean mainland China, Hong Kong, Macau and Taiwan. For any Eligible Expenses and / or other expenses incurred in mainland China, the benefits payable shall be subject to the limitation of choice of Hospitals as specified in the Supplement – Limitation of Benefits.
- (3) General Ward shall mean a room categorised as a ward class lower than a Semi-private Room including the room categorised as a general ward or standard room by a Hospital in Hong Kong. For Hospitals without the corresponding ward class categorisation or any Hospitals outside Hong Kong, a General Ward shall mean a room in a Hospital with more than 2 patient beds (not including Hospital companion bed). Hospitals offer various accommodation options with different facilities, and the categorization used by the Hospitals may be different from the definitions under the Terms and Benefits. If you are unsure of whether a particular accommodation option meets the General Ward definition under the Terms and Benefits, please contact the Company before Confinement.
- (4) “Back-You-Up Deductible” shall apply in lieu of the selected Deductible of the Plan if Eligible Expenses and / or other expenses are incurred in mainland China and are:
 - a. for home nursing under Enhanced benefit 2; or
 - b. charged by a Hospital as set out below or an outpatient unit of such Hospital.

The relevant Hospital is rated “Class 2” or above as defined by the government of the People’s Republic of China and is not on the list of designated hospitals in mainland China published on the product page “**Chubb VHIS – Superb Plan**” of the Company’s website (life.chubb.com/hk). The rating of Hospitals in mainland China and the list of designated hospitals in mainland China may change from time to time. If you want to confirm whether “Back-You-Up Deductible” is applicable, please contact the Company beforehand. For details, please refer to the Supplement – Limitation of Benefits.
- (5) Unless otherwise specified, the Eligible Expenses and / or other expenses incurred in respect of the same item shall not be recoverable under more than one benefit item in the table above. Eligible Expenses and / or other expenses payable shall be subject to the limitations as specified in the Supplement – Limitation of Benefits.
- (6) Full cover shall mean no itemised benefit sublimit, and the Eligible Expenses and / or other expenses payable are subject to any remaining balance of Deductible or “Back-You-Up Deductible” (where applicable) and Annual Benefit Limit in the relevant Policy Year.
- (7) The Company shall have the right to ask for proof of recommendation e.g. written referral or testifying statement on the claim form by the attending doctor or Registered Medical Practitioner.
- (8) Tests covered here only include computed tomography (“CT” scan), magnetic resonance imaging (“MRI” scan), positron emission tomography (“PET” scan), PET-CT combined and PET-MRI combined.
- (9) Treatments covered here only include radiotherapy, chemotherapy, targeted therapy, immunotherapy and hormonal therapy.
- (10) Specific items refers to the following medical appliances implanted inside the Insured Person’s body during surgery: (i) pacemaker; (ii) stents for Percutaneous Transluminal Coronary Angioplasty; (iii) intraocular lens; (iv) artificial cardiac valve; (v) metallic or artificial joints for joint replacement; (vi) prosthetic ligaments for replacement or implantation between bones; (vii) prosthetic intervertebral disc; and (viii) implanted materials during reconstructive surgery as specified under Supplement – Enhanced Benefits.

More about the Plan

Product Type	Basic plan	
Type of the Certified Plan	Certified VHIS Flexi Plan	
Deductible options	Deductible amount per Policy Year	VHIS certification number
	HKD 0	F00082-01-000-01
	HKD 25,000	F00082-02-000-01
	HKD 50,000	F00082-03-000-01
	HKD 100,000	F00082-04-000-01
Product Nature	Individual hospital indemnity insurance product	
Premium Payment Term	Up to Age 128 ⁷	
Benefit Term	Guaranteed annual Renewal until the Insured Person reached the Age of 128 ⁷	
Issue Age	Age 0 (15 days) – 80	
Premium Structure ⁽ⁱ⁾	<ul style="list-style-type: none">• Premium will be adjusted every year based on the premium rate (which generally will increase as the Age of the Insured Person increase) applicable to the Insured Person at that time.• Premium rates are not guaranteed. You should refer to the benefit illustration for the premium calculated based on the current scale of premium rates. Please also refer to the “Key Product Risks – Premium Adjustment” under the “Important Information” section in this product brochure for premium rate adjustment factors. The Company reserves the right to review and adjust the premium rates upon each Renewal Date. <p>(i) Please refer to Premium Adjustment under “Important Information” section in this product brochure for details.</p>	
Premium Payment Mode	Annually / semi-annually / quarterly / monthly	
Currency	Hong Kong Dollar (HKD)	

Waiting Period	Conditions	Waiting Period
	Unknown Pre-existing conditions ⁶	First 30 days
	For illness that arise after the Policy Effective Date and / or are caused by Accident	No Waiting Period
	Human Immunodeficiency Virus ("HIV") treatment	<ul style="list-style-type: none"> • Exclude from any coverage if it is Pre-existing conditions⁶ • Coverage will not be provided within the first 5 years if it cannot be proven whether the 1st occurrence happened before the Policy Effective Date • No Waiting Period if HIV caused by sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth

Remarks

- 1. Full cover shall mean no itemised benefit sublimit, and the Eligible Expenses and / or other expenses payable are subject to any remaining balance of Deductible or “Back-You-Up Deductible” (where applicable) and Annual Benefit Limit in the relevant Policy Year.
- 2. Greater China shall mean mainland China, Hong Kong, Macau and Taiwan. For any Eligible Expenses and / or other expenses incurred in mainland China, the benefits payable shall be subject to the limitation of choice of Hospitals as specified in the Supplement – Limitation of Benefits.
- 3. It is based on a comparison with other VHIS plans for new Composite and Long-Term Businesses as identified in the Register of Authorized Insurers by Insurance Authority as of 16 December 2025.
- 4. “Back-You-Up Deductible” shall apply in lieu of the selected Deductible of the Plan if Eligible Expenses and / or other expenses are incurred in mainland China and are:
 - (i) for home nursing expense benefit as stated in the Supplement – Enhanced benefit; or
 - (ii) charged by a Hospital as set out below or an outpatient unit of such Hospital.

The relevant Hospital is rated “Class 2” or above as defined by the government of the People’s Republic of China and is not on the list of designated hospitals in mainland China published on the product page “**Chubb VHIS – Superb Plan**” of the Company’s website (life.chubb.com/hk).

The rating of Hospitals in mainland China and the list of designated hospitals in mainland China may change from time to time. If you want to confirm whether “Back-You-Up Deductible” is applicable, please contact the Company beforehand. For details, please refer to the Supplement – Limitation of Benefits.

Upon variation of the selected Deductible of the Plan, the “Back-You-Up Deductible” that may become applicable in lieu of the Deductible shall be adjusted to the corresponding amount per Policy Year accordingly. For details, please refer to the Supplement – Change of Deductible.

- 5. The issuance of the Plan does not necessarily mean you are eligible for any tax deduction for the premiums you have paid for this Plan. For further information on tax deduction under the VHIS, please contact the Inland Revenue Department. If you have doubts, you should seek professional advice. Chubb Life does not provide tax and / or legal advice. You should consult independent tax and / or legal advisor if needed. Tax deduction for the qualifying premiums paid under VHIS policy (not including levy) will be based on the premiums paid after deducting the premium discount (if any). For more information, please refer to www.ird.gov.hk or seek independent tax advice.
- 6. Eligible Expenses arising from Pre-existing Condition(s) that the Policy Holder and / or Insured Person was not aware and would not reasonably have been aware of at the time of submission of Application, including any updates of and changes to the required information (if so requested by the Company), shall be payable in accordance with the Terms and Benefits, subject to the following waiting period and reimbursement arrangement:

First 30 days of the 1 st Policy Year	31 st day of the 1 st Policy Year onwards
No coverage	Full coverage

- 7. Terms and Benefits shall be effective from the Policy Effective Date in consideration of the payment of premium and is Renewable for each Policy Year. The Renewal of your Policy is guaranteed up to the Age of 128 of the Insured Person, provided this Plan is continually offered by the Company. The Plan will remain Renewable as long as the Company maintains its registered status as a VHIS provider. For details, please refer to the Terms and Benefits of this Plan.
- 8. The value-added services are provided by and arranged through a third-party service provider which is independent contractor and are not our agent. The services do not form part of the Policy. Both the Company and the third-party service provider reserve the right to terminate or vary any part or all of the services at their sole discretion without notice. We shall not be responsible for any acts and omissions on the part of the third-party service provider. We make no representation, warranty or undertaking as to any service offered, provided or procured by the third-party service provider. Your Policy must be in force when using the services. For details, please refer to the “**Chubb VHIS – Superb Plan Value-added Services Leaflet**” and the respective terms and conditions applicable to the services.
- 9. Designated GBA cities include Guangzhou, Shenzhen, Zhuhai, Foshan, Dongguan and Zhongshan, and this list is subject to change from time to time upon the mutual agreement between the third-party service provider and the Company.

Notes:

- In this product brochure, “Age” refers to age at the attained age of the Insured Person.
- “You” or “your” refers to the Policy Holder.

Standard Premium Schedule (Annual) - HKD

(For Insured Persons from Age 0 to 81 at Policy commencement)

Deductible	0	25,000	50,000	100,000	0	25,000	50,000	100,000
Age*	Non-smoker				Smoker			
0	9,434	4,853	3,868	3,037	9,434	4,853	3,868	3,037
1	9,434	4,853	3,868	3,037	9,434	4,853	3,868	3,037
2	9,434	4,853	3,868	3,037	9,434	4,853	3,868	3,037
3	9,434	4,853	3,868	3,037	9,434	4,853	3,868	3,037
4	9,434	4,853	3,868	3,037	9,434	4,853	3,868	3,037
5	8,209	3,996	3,318	2,647	8,209	3,996	3,318	2,647
6	8,209	3,996	3,318	2,647	8,209	3,996	3,318	2,647
7	8,209	3,996	3,318	2,647	8,209	3,996	3,318	2,647
8	8,209	3,996	3,318	2,647	8,209	3,996	3,318	2,647
9	8,209	3,996	3,318	2,647	8,209	3,996	3,318	2,647
10	6,983	3,087	2,823	2,321	6,983	3,087	2,823	2,321
11	6,782	2,999	2,665	2,196	6,782	2,999	2,665	2,196
12	6,582	2,910	2,507	2,071	6,582	2,910	2,507	2,071
13	6,381	2,822	2,349	1,946	6,381	2,822	2,349	1,946
14	6,180	2,734	2,192	1,821	6,180	2,734	2,192	1,821
15	5,979	2,645	2,034	1,696	5,979	2,645	2,034	1,696
16	6,094	2,660	2,061	1,725	6,094	2,660	2,061	1,725
17	6,208	2,675	2,088	1,755	6,208	2,675	2,088	1,755
18	6,322	2,689	2,115	1,784	6,726	2,862	2,251	1,898
19	6,437	2,704	2,142	1,814	7,080	2,975	2,356	1,994
20	6,551	2,719	2,168	1,843	7,205	2,992	2,386	2,027
21	6,829	2,822	2,228	1,883	7,510	3,105	2,452	2,070
22	7,108	2,925	2,288	1,922	7,818	3,218	2,518	2,115
23	7,386	3,028	2,348	1,961	8,126	3,330	2,584	2,154
24	7,664	3,132	2,408	2,000	8,429	3,442	2,649	2,201
25	7,943	3,235	2,468	2,039	8,735	3,556	2,715	2,242
26	8,168	3,294	2,525	2,064	8,983	3,623	2,777	2,270
27	8,394	3,353	2,581	2,089	9,232	3,688	2,839	2,299
28	8,620	3,412	2,638	2,114	9,481	3,751	2,899	2,324
29	8,845	3,471	2,694	2,139	9,730	3,819	2,963	2,352
30	9,071	3,530	2,751	2,163	9,978	3,884	3,026	2,381
31	9,273	3,636	2,795	2,212	10,198	4,001	3,074	2,434
32	9,474	3,743	2,839	2,260	10,422	4,118	3,123	2,485
33	9,676	3,849	2,883	2,308	10,644	4,234	3,172	2,540
34	9,878	3,956	2,928	2,357	10,866	4,353	3,221	2,593
35	10,080	4,062	2,972	2,405	11,088	4,466	3,267	2,646
36	10,380	4,180	3,048	2,475	11,416	4,600	3,354	2,722
37	10,680	4,298	3,123	2,545	11,748	4,729	3,437	2,799
38	10,981	4,415	3,199	2,616	12,077	4,855	3,518	2,878
39	11,281	4,533	3,274	2,686	12,409	4,985	3,601	2,955
40	11,581	4,651	3,350	2,756	12,734	5,115	3,683	3,032
41	12,087	4,845	3,497	2,868	13,294	5,329	3,846	3,153
42	12,593	5,040	3,645	2,980	13,851	5,545	4,010	3,278
43	13,098	5,235	3,792	3,091	14,407	5,759	4,171	3,403
44	13,604	5,430	3,940	3,203	14,963	5,972	4,336	3,520
45	14,110	5,625	4,088	3,315	15,518	6,188	4,496	3,648
46	14,641	5,955	4,282	3,479	16,104	6,551	4,709	3,825
47	15,172	6,286	4,476	3,643	16,689	6,915	4,923	4,007
48	15,702	6,616	4,671	3,807	17,273	7,277	5,137	4,188
49	16,233	6,946	4,865	3,971	17,857	7,640	5,351	4,366

* "Age" refers to the age nearest birthday of the Insured Person.
^ For Renewal only.

Standard Premium Schedule (Annual) - HKD

(For Insured Persons from Age 0 to 81 at Policy commencement)

Deductible	0	25,000	50,000	100,000	0	25,000	50,000	100,000
Age*	Non-smoker				Smoker			
50	16,764	7,277	5,060	4,135	18,440	8,004	5,567	4,550
51	17,545	7,673	5,376	4,396	19,299	8,438	5,913	4,833
52	18,325	8,069	5,693	4,657	20,159	8,875	6,263	5,124
53	19,106	8,465	6,009	4,917	21,017	9,311	6,611	5,411
54	19,886	8,861	6,326	5,178	21,873	9,747	6,959	5,697
55	20,667	9,257	6,642	5,439	22,732	10,183	7,305	5,982
56	22,054	9,901	7,164	5,863	24,257	10,889	7,880	6,449
57	23,442	10,545	7,685	6,288	25,786	11,597	8,452	6,916
58	24,829	11,190	8,207	6,712	27,313	12,307	9,026	7,381
59	26,217	11,834	8,728	7,137	28,837	13,016	9,600	7,853
60	27,604	12,478	9,249	7,561	30,362	13,727	10,175	8,316
61	30,431	13,321	9,894	8,118	33,473	14,654	10,882	8,930
62	33,259	14,165	10,539	8,675	36,588	15,583	11,593	9,543
63	36,086	15,008	11,184	9,233	39,695	16,510	12,302	10,155
64	38,914	15,852	11,829	9,790	42,805	17,436	13,012	10,768
65	41,741	16,695	12,474	10,347	45,915	18,364	13,722	11,382
66	44,055	17,842	13,245	10,915	48,460	19,626	14,569	12,004
67	46,369	18,989	14,015	11,482	51,007	20,889	15,417	12,630
68	48,684	20,137	14,786	12,050	53,553	22,148	16,264	13,254
69	50,998	21,284	15,556	12,617	56,097	23,413	17,113	13,879
70	53,312	22,431	16,327	13,185	58,644	24,676	17,959	14,505
71	55,677	23,662	17,094	13,808	61,243	26,028	18,802	15,188
72	58,041	24,892	17,862	14,431	63,846	27,381	19,649	15,873
73	60,406	26,123	18,629	15,055	66,446	28,737	20,493	16,560
74	62,770	27,353	19,397	15,678	69,047	30,091	21,336	17,246
75	65,135	28,584	20,164	16,301	71,649	31,441	22,182	17,933
76	66,957	29,972	21,159	17,077	73,653	32,970	23,274	18,784
77	68,779	31,360	22,153	17,853	75,656	34,498	24,369	19,638
78	70,600	32,749	23,147	18,630	77,662	36,024	25,463	20,493
79	72,422	34,137	24,142	19,406	79,665	37,552	26,556	21,348
80	74,244	35,525	25,136	20,182	81,669	39,078	27,649	22,200
81	77,118	36,920	26,103	21,064	84,830	40,611	28,712	23,170
82^	79,993	38,316	27,070	21,946	87,993	42,149	29,776	24,142
83^	82,867	39,711	28,037	22,828	91,154	43,682	30,842	25,110
84^	85,742	41,107	29,004	23,710	94,316	45,217	31,905	26,078
85^	88,616	42,502	29,971	24,592	97,478	46,750	32,967	27,048
86^	91,490	43,897	30,938	25,473	100,638	48,286	34,032	28,019
87^	94,365	45,293	31,905	26,355	103,800	49,824	35,096	28,991
88^	97,239	46,688	32,873	27,237	106,964	51,357	36,163	29,963
89^	100,114	48,084	33,840	28,119	110,123	52,891	37,222	30,931
90^	102,988	49,479	34,807	29,001	113,285	54,426	38,289	31,901
91^	105,234	50,506	36,033	29,957	115,755	55,554	39,635	32,950
92^	107,479	51,532	37,258	30,912	118,226	56,686	40,985	34,005
93^	109,725	52,559	38,484	31,868	120,694	57,815	42,333	35,054
94^	111,970	53,586	39,710	32,824	123,165	58,946	43,680	36,105
95^	114,216	54,612	40,936	33,779	125,638	60,073	45,030	37,156
96^	116,461	55,639	42,162	34,735	128,110	61,206	46,378	38,209
97^	118,707	56,666	43,388	35,691	130,577	62,333	47,728	39,261
98^	120,952	57,692	44,614	36,646	133,047	63,462	49,074	40,309
99^	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360

* "Age" refers to the age nearest birthday of the Insured Person.
^ For Renewal only.

Standard Premium Schedule (Annual) - HKD

(For Insured Persons from Age 0 to 81 at Policy commencement)

Deductible	0	25,000	50,000	100,000	0	25,000	50,000	100,000
Age [*]	Non-smoker				Smoker			
100 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
101 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
102 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
103 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
104 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
105 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
106 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
107 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
108 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
109 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
110 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
111 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
112 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
113 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
114 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
115 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
116 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
117 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
118 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
119 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
120 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
121 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
122 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
123 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
124 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
125 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
126 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360
127 [^]	123,198	58,719	45,840	37,602	135,516	64,591	50,423	41,360

* "Age" refers to the age nearest birthday of the Insured Person.

^ For Renewal only.

Notes:

- This Standard Premium schedule does not include levy which is collected by the Insurance Authority. Please visit https://www.ia.org.hk/en/infocenter/faqs/faqs_levy.html for details.
- The actual premiums payable will be adjusted at each Renewal based on the age of the Insured Person according to the prevailing Standard Premium schedule.
- The Company may adjust the Standard Premium schedule on a Portfolio basis if necessary. The listed Standard Premiums above are not indicative of the future Standard Premiums. The Company will send out a written notice to the Policy Holders before each end of Policy Year regarding the actual premiums payable (including Premium Loading, if applicable) and levy of the coming year.
- The above premium is shown in annual modal premium. The modal factor for each payment of different modal premium payment is: Annual=1.0000; Semi-annual=0.5125; Quarterly=0.2594; Monthly=0.0872. Modal premium is calculated by multiplying annual modal premium by modal factor and round to nearest 2 decimal places.

Important Information

The product information of this product brochure does not contain the full terms and conditions of the policy and for general reference only and is not part of the Policy. Please refer to the Terms and Benefits for the definitions of capitalized terms. This product brochure provides an overview of the key features of this product, details of charges, exclusions and compensation payment conditions, as well as complete terms and conditions should be read along with other materials which cover additional information about this product before making application. Such materials include, but are not limited to, Terms and Benefits that contain exact terms and conditions, benefit illustrations (if any), Policy documents and other relevant marketing materials, which are all available upon request. You might also consider seeking independent professional advice if needed. The Plan may serve as standalone plan(s) without bundling with other type(s) of insurance product.

Chubb VHIS – Superb Plan is a VHIS certified plan with no savings element, designed for individuals with medical needs, providing financial protection support to help coping with unexpected challenges.

Key Product Risks

The following information helps you better understand the key product risks associated with the Plan that you may need to pay attention to before application.

- **Premium Payment Term**
You should only apply for this product if you intend to pay the premium for the whole of the Premium Payment Term. If you do not pay the premium by the relevant premium due date, we allow a grace period of 31 days after the premium due date for payment of each premium. This Policy shall continue to be in effect during the grace period but no benefits shall be payable unless the premium is paid. If the premium is still unpaid in full at the expiration of the grace period, this Policy shall be terminated immediately on the date on which the unpaid premium is first due. You will lose your insurance coverage and even the premiums paid as a result.
- **Premium Adjustment**
The Company reserves the right to review and adjust the premium rates of this product upon each Renewal Date based on our expectation and experience of a series of factors including but not limited to medical trend, medical cost inflation, investment returns, claims, policy surrenders and expenses.
- **Credit Risk**
This product is issued and underwritten by the Company. Your Policy is therefore subject to the credit risk of the Company. If the Company is unable to satisfy the financial obligation of the Policy, you may lose your insurance coverage and the premiums paid.
- **Inflation Risk**
Please note that the medical costs in the future are likely to be higher than they are today due to inflation. Hence, the benefit amounts and the premium rates of this product may be adjusted in the future to reflect the inflation.

Termination of Policy

The Policy shall be automatically terminated upon the earliest of the followings:

- a. where this Policy is terminated due to non-payment of premiums after the grace period as specified in the Terms and Benefits;
- b. the day immediately following the death of the Insured Person; or
- c. the Company has ceased to have the requisite authorisation under the “Insurance Ordinance” to write or continue to write the Policy;

The termination shall be effective at 00:00 hours of the effective date of termination.

You may cancel your Policy by submitting the form prescribed by us. You may contact your licensed insurance intermediary or contact our Customer Service Centre at +852 2894 9833 to get a copy of the form.

Limitations of Benefits

1. Geographical limitation

- a. All benefits described in the Terms and Benefits shall be subject to the geographical limitation (i.e. “Greater China”) as specified in the Benefit Schedule, except for the psychiatric treatments as stated in Section 3(l) of Part 6 of the Terms and Benefits.
- b. The benefits payable under Section 3(l) of Part 6 of the Terms and Benefits shall only be payable for the Eligible Expenses charged on the psychiatric treatments during Confinement in Hong Kong.
- c. For any Eligible Expenses and / or other expenses incurred in mainland China, the benefits payable in accordance with the Terms and Benefits shall be subject to the applicable limitation as stated in Limitation on choice of Hospitals, except for the home nursing expenses benefit as stated in the Supplement – Enhanced Benefits.
- d. For any non-Emergency Treatment performed outside the territorial scope of cover, the final amount of Eligible Expenses and / or other expenses payable shall be calculated in accordance with the Terms and Benefits and shall be calculated in accordance with the formula as set out in Supplement – Limitation of Benefits.
- e. For any Emergency Treatment performed outside the territorial scope of cover, any Eligible Expense and / or other expenses incurred shall be payable in accordance with the Terms and Benefits.

2. Limitation on choice of Hospitals

- a. For any Eligible Expenses and / or other expenses charged by any Hospitals (whether private or public and including the outpatient unit of such Hospitals) in mainland China, the actual amount of Eligible Expenses and / or other expenses payable depends on whether the Hospital is rated "Class 2" or above as defined by the government of the People's Republic of China and is on the list of designated hospitals in mainland China published at the product page "Chubb VHIS – Superb Plan" of the Company website (life.chubb.com/hk). For details, please refer to Supplement – Limitation of Benefits.
- b. The list of designated hospitals in mainland China may be varied, updated and amended from time to time at the Company's discretion. Policy Holder and / or Insured Person are recommended to refer to the product page "Chubb VHIS – Superb Plan" of the Company's website (life.chubb.com/hk) for the latest list beforehand. The Company shall have the obligation to provide the most up-to-date information to the Policy Holder and Insured Person including where the Company is so requested.

For details, please refer to Terms and Benefits.

3. Limitation on choice of ward class

- a. If the Insured Person is voluntarily Confined in a ward class of a Hospital higher than the entitled ward class as stated in the Benefit Schedule, any benefits payable under the Terms and Benefits and Supplement – Enhanced Benefits shall be subject to the following ward class adjustment factor:

Entitled ward class as specified in the Benefit Schedule	Actual ward class occupied by the Insured Person during Confinement	Ward class adjustment factor
General Ward	Semi-private Room	50%
	Standard Private Room	25%
	Above Standard Private Room	25%

- b. The ward class adjustment factor above shall not apply when such Confinement in a room of class higher than the entitled ward class is due to:
 - (i) unavailability of entitled ward class for Emergency Treatment as a result of ward or room shortage for Confinement;
 - (ii) isolation reasons that require a specific class of accommodation; or
 - (iii) other reasons not involving personal preference of the Policy Holder and / or the Insured Person.

Key Exclusions

The company shall not pay any benefits in relation to or arising from the following expenses:

- a. Expenses incurred for treatments, procedures, medications, tests or services which are not Medically Necessary.
- b. Expenses incurred for the whole or part of the Confinement solely for the purpose of diagnostic procedures or allied health services, including but not limited to physiotherapy, occupational therapy and speech therapy, unless such procedure or service is recommended by a Registered Medical Practitioner for Medically Necessary investigation or treatment of a Disability which cannot be effectively performed in a setting for providing Medical Services to a Day Patient.
- c. Expenses arising from Human Immunodeficiency Virus ("HIV") and its related Disability, which is contracted or occurs before the Policy Effective Date. Irrespective of whether it is known or unknown to the Policy Holder or the Insured Person at the time of submission of Application, including any updates of and changes to such requisite information (if so requested by the Company under the Terms and Benefits) such Disability shall be generally excluded from any coverage of the Terms and Benefits if it exists before the Policy Effective Date. If evidence of proof as to the time at which such Disability is first contracted or occurs is not available, manifestation of such Disability within the first 5 years after the Policy Effective Date shall be presumed to be contracted or occur before the Policy Effective Date, while manifestation after such 5 years shall be presumed to be contracted or occur after the Policy Effective Date.

However, the exclusion shall not apply where HIV and its related Disability is caused by sexual assault, medical assistance, organ transplant, blood transfusions or blood donation, or infection at birth, and in such cases the other terms of the Terms and Benefits shall apply.
- d. Expenses incurred for Medical Services as a result of Disability arising from or consequential upon the dependence, overdose or influence of drugs, alcohol, narcotics or similar drugs or agents, self-inflicted injuries or attempted suicide, illegal activity, or venereal and sexually transmitted disease or its sequelae (except for HIV and its related Disability).
- e. Any charges in respect of services for:
 - (i) beautification or cosmetic purposes, unless necessitated by Injury caused by an Accident and the Insured Person receives the Medical Services within 90 days of the Accident; or except to the extent covered by the reconstructive surgery benefit payable under the Supplement – Enhanced Benefits; or
 - (ii) correcting visual acuity or refractive errors that can be corrected by fitting of spectacles or contact lens, including but not limited to eye refractive therapy, LASIK and any related tests, procedures and services.

- f. Expenses incurred for prophylactic treatment or preventive care, including but not limited to general check-ups, routine tests, screening procedures for asymptomatic conditions, screening or surveillance procedures based on the health history of the Insured Person and / or his family members, Hair Mineral Analysis (HMA), immunisation or health supplements. For the avoidance of doubt, the exclusion does not apply to:
 - (i) treatments, monitoring, investigation or procedures with the purpose of avoiding complications arising from any other Medical Services provided;
 - (ii) removal of pre-malignant conditions; and
 - (iii) treatment for prevention of recurrence or complication of a previous Disability.
- g. Expenses incurred for dental treatment and oral and maxillofacial procedures performed by a dentist except for Emergency Treatment and surgery during Confinement arising from an Accident. Follow-up dental treatment or oral surgery after discharge from Hospital shall not be covered.
- h. Expenses incurred for Medical Services and counselling services relating to maternity conditions and its complications, including but not limited to diagnostic tests for pregnancy or resulting childbirth, abortion or miscarriage; birth control or reversal of birth control; sterilisation or sex reassignment of either sex; infertility including in-vitro fertilisation or any other artificial method of inducing pregnancy; or sexual dysfunction including but not limited to impotence, erectile dysfunction or pre-mature ejaculation, regardless of cause.
- i. Expenses incurred for the purchase of durable medical equipment or appliances including but not limited to wheelchairs, beds and furniture, airway pressure machines and masks, portable oxygen and oxygen therapy devices, dialysis machines, exercise equipment, spectacles, hearing aids, special braces, walking aids, over-the-counter drugs, air purifiers or conditioners and heat appliances for home use. For the avoidance of doubt, this exclusion shall not apply to rental of medical equipment or appliances during Confinement or on the day of the Day Case Procedure.
- j. Expenses incurred for traditional Chinese medicine treatment, including but not limited to herbal treatment, bone-setting, acupuncture, acupressure and tui na, and other forms of alternative treatment including but not limited to hypnotism, qigong, massage therapy, aromatherapy, naturopathy, hydrotherapy, homeotherapy and other similar treatments; except to the extent covered by Post-Confinement / Day Case Procedure outpatient ancillary benefit payable under the Supplement – Enhanced Benefits.
- k. Expenses incurred for experimental or unproven medical technology or procedure in accordance with the common standard, or not approved by the recognised authority, in the locality where the treatment, procedure, test or service is received.
- l. Expenses incurred for Medical Services provided as a result of Congenital Condition(s) which have manifested or been diagnosed before the Insured Person attained the Age of 8.

- m. Eligible Expenses which have been reimbursed under any law, or medical program or insurance policy provided by any government, company or other third party.
- n. Expenses incurred for treatment for Disability arising from war (declared or undeclared), civil war, invasion, acts of foreign enemies, hostilities, rebellion, revolution, insurrection, or military or usurped power.

Medical Necessary

The Company shall reimburse the Eligible Expenses and / or other expenses which are Medically Necessary and Reasonable and Customary.

“Medically Necessary” shall mean the need to have medical service for the purpose of investigating or treating the relevant Disability in accordance with the generally accepted standards of medical practice and such medical service must:

- a. require the expertise of, or be referred by, a Registered Medical Practitioner;
- b. be consistent with the diagnosis and necessary for the investigation and treatment of the Disability;
- c. be rendered in accordance with standards of good and prudent medical practice, and not be rendered primarily for the convenience or the comfort of the Insured Person, his family, caretaker or the attending Registered Medical Practitioner;
- d. be rendered in the setting that is most appropriate in the circumstances and in accordance with the generally accepted standards of medical practice for the medical services; and
- e. be furnished at the most appropriate level which, in the prudent professional judgment of the attending Registered Medical Practitioner, can be safely and effectively provided to the Insured Person.

For details, please refer to Terms and Benefits.

Reasonable and Customary

“Reasonable and Customary” shall mean, in relation to a charge for Medical Service, such level which does not exceed the general range of charges being charged by the relevant service providers in the locality where the charge is incurred for similar treatment, services or supplies to individuals with similar conditions, e.g. of the same sex and similar Age, for a similar Disability, as reasonably determined by the Company in utmost good faith. The Reasonable and Customary charges shall not in any event exceed the actual charges incurred.

In determining whether a charge is Reasonable and Customary, the Company shall make reference to the followings (if applicable):

- a. treatment or service fee statistics and surveys in the insurance or medical industry;
- b. internal or industry claim statistics;
- c. gazette published by the Government; and / or
- d. other pertinent source of reference in the locality where the treatments, services or supplies are provided.

Claims

All claims incurred in respect of the Terms and Benefits shall be submitted to the Company within 90 days after the date on which the Insured Person is discharged from the Hospital, or (where there is no Confinement) the date on which the relevant Medical Service is performed and completed. For this purpose, a claim shall be deemed not valid or complete and benefit shall not be payable unless:

- a. all original receipts and / or original itemised bills together with the diagnosis, type of treatment, procedure, test or service provided shall have been submitted to the Company; and
- b. all relevant information, certificates, reports, evidence, referral letter and other data or materials as reasonably required by the Company shall have been furnished to the Company for processing of such claim.

The Policy Holder shall notify the Company if claims cannot be submitted within the above timeframe, otherwise the Company shall have the right to reject claims submitted after the above timeframe.

All certificates, information and evidence that are reasonably required by the Company and which can be reasonably provided by the Policy Holder shall be furnished at the expenses of the Policy Holder. The Company shall bear all expenses incurred in obtaining further certificates, information and evidence for the purposes of verification of the claim after the Policy Holder has submitted all required information pursuant to (a) and (b) above.

You may contact your licensed insurance intermediary or contact our Customer Service Center at +852 2894 9833 to get a copy of the form, or you can download it from our Company website at life.chubb.com/hk.

Disclosure

If your Policy was obtained by fraudulent misrepresentation or fraudulent non-disclosure, your Policy will be treated as void from inception and all the monies paid to us under the Policy will be forfeited.

Cooling-off Period

If you are not satisfied with your Policy, you have the right to cancel it by submitting a signed notice and return the Policy document (if any) to Chubb Life Insurance Hong Kong Limited at 35/F, Chubb Tower, Windsor House, 311 Gloucester Road, Causeway Bay, Hong Kong within a period of 21 calendar days immediately following either the day of delivery of the Policy or a notice informing you or your nominated representative about the availability of the Policy and the expiry date of the cooling-off period, whichever is earlier. If the last day of the 21-calendar day period is not a working day, the cooling-off period shall include the next working day. Upon such cancellation of the Policy, we will refund the total amount of premiums you paid without any interest, less any amount paid to you by the Company under the Policy, in the original currency paid by you subject to any fluctuation of exchange rate upon cancellation, provided that the amount refunded will not exceed the total amount you paid in the original currency under the Policy.

Collection of Premium Levy by Insurance Authority

The Insurance Authority started collecting levy on insurance premiums from Owners for policies issued in Hong Kong since January 1, 2018.

For details of the levy and its collection arrangement, please visit our Company website at life.chubb.com/hk or contact our Customer Service Center at +852 2894 9833. In the event that we refund your premiums, whether in full or in part, e.g. upon cancellation of your policy during the cooling-off period, the proportionate levy paid by you will also be refunded accordingly.


Every Way of Life


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